

# ACQUIRING PATIENT CONSENT FOR ELECTRONIC COMMUNICATIONS

## Introduction and Background

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**Obtaining patient consent for electronic communications ensures compliance with PIPEDA and FIPPA, safeguarding privacy and fostering trust.** Patients must understand the risks and benefits of digital communication before providing informed consent. Many clinics rely on inconsistent verbal consent methods, risking miscommunication and privacy issues. This project aims to standardize consent forms to ensure clear authorization and regulatory compliance.

## Objectives

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- Develop and implement a standardized Patient Consent for Electronic Communications Form.
- Ensure 100% of new and existing patients provide documented consent before receiving electronic communication.
- Improve patient understanding of the risks, benefits, and security measures associated with digital communications.
- Align clinic practices with privacy laws and ethical guidelines to enhance compliance and protect patient confidentiality. This will, in turn, enable use of downstream technology that can improve staff productivity.

## Methodology Model for Improvement/ PDSA cycle

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- **Data Collection:** Assess current practices for obtaining patient consent to understand gaps and identify the best way to get patient consent in a structured way moving forward.
- **Form Template Development:** leverage available resources to create a form that meets the needs of your clinic.
- **Pilot Implementation:** Introduce the form to a small group of patients, gather feedback over a limited number of weeks (e.g. two weeks), and refine as needed.
- **Clinic-wide Rollout:** Implement the form across all patient interactions and integrate it into the intake workflow.

## Implementation Process

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### Phase 1

- **Step 1: Assessment Phase**

- Use EMR reports to review the portion of patients that have provided verbal vs written consent.
- Outline current clinic processes for obtaining consent to identify gaps.
- Survey staff to identify the most appropriate process moving forward
- **Step 2: Form Design**
  - Use one of the followings to develop a consent form with a view of the circumstances in which electronic communications with patients are conducted in your clinic. Two examples of forms that were used as baselines:
    - The [CNPS Template form: Consent to use electronic communications](#)
    - Pathways Medical Care Directory's template [for obtaining electronic communications consent](#)
  - To ensure legal compliance, get a legal consultant to review your form
- **Step 3: Staff Training**
  - Educate clinic staff on the importance of consent and the new form
  - Provide written guidance (and best practices) for responding to patient questions.
- **Step 4: Pilot Program**
  - Introduce the form to a small group of patients for a limited number of weeks (e.g 2 weeks)
  - Gather feedback from staff and patients and refine as needed.
  - Measure the impact for evaluation

## Phase 2

- **Step 5: Clinic-Wide Implementation**
  - Integrate the consent form into new patient intake
  - Create list of patients that need to sign the consent so that they are presented with the form at their next visit
  - Develop an FAQ document and patient resources, as needed
- **Step 6: Ongoing Evaluation**
  - Periodically review progress
  - Collect feedback from patients and staff and modify your approach as needed

## Anticipated Time Needed

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- Approximately 10-12 hours

## Highlights of Outcomes (To be filled by NP)

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### **\*Example outcomes:**

- *Preliminary data from the pilot phase showed rate of patient who had provided consent increased from 30% to over 80%*
- *Patient feedback indicated greater clarity and confidence in electronic communications*
- *As a byproduct of obtaining consent, providers can now communicate with patients electronically (at times through office staff) which has improved access and increased efficiency*

## Impact and Sustainability (To be filled by NP)

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**\*Example:** *The consent form is now mandatory during patient intake, ensuring compliance and privacy. Annual audits and ongoing education campaigns help refine its usage and keep patients informed.*